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CONFIRMATION NO. 8301

<b>SERIAL NUMBER</b> 10/506,406	<b>FILING OR 371(c) DATE</b> 03/14/2005 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1653	<b>ATTORNEY DOCKET NO.</b> 9471-011-999
<b>APPLICANTS</b> Rafal Swiercz, Bastrop, TX; Steven H. Selman, Toledo, OH; Jerzy Jankun, Sylvania, OH; Ewa Skrzypczak-Jankun, Sylvania, OH; Joanna Chorostowska-Wynimko, Warsaw, POLAND; <i>HA</i>				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US03/06679 03/04/2003 which claims benefit of 60/361,670 03/04/2002 <i>HA</i>				
<b>** FOREIGN APPLICATIONS *****</b> NONE <i>HA</i>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>HA</i>		<b>STATE OR COUNTRY</b> TX	<b>SHEETS DRAWING</b> 16	<b>TOTAL CLAIMS</b> 23
Verified and Acknowledged Examiner's Signature _____ Initials _____		<b>INDEPENDENT CLAIMS</b> 2		
<b>ADDRESS</b> 20583				
<b>TITLE</b> Modified plasminogen inhibitor type-1 and methods based thereon				
<b>FILING FEE RECEIVED</b> 914	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	